## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

**Application or Docket Number** 

09867754

| CLAIMS AS FILED - PART I (Column 1)  |  |  |   |                                  | -                   | (Column 2) SMALL ENTITY |          | OTHER THAN<br>OR SMALL ENTITY |                        |        |                     |                        |
|--|--|--|---|----------------------------------|---------------------|-------------------------|----------|-------------------------------|------------------------|--------|---------------------|------------------------|
| TOTAL CLAIMS   |  |  |   |                                  |                     |                         | 1        | RATE                          | FEE                    | ]      | RATE                | FEE                    |
| FOR  |  |  | NUMBER FILED                            |                                  | NUMBER EXTRA        |                         |          | BASIC FEE                     |                        | OR     |                     |                        |
| TOTAL CHARGEABLE CLAIMS  |  |  | 29 minus 20=                            |                                  | • 9                 |                         | Ì        | X\$ 9=                        | -                      | OR     | 1/2/2               | 162                    |
| INDEPENDENT CLAIMS   |  |  | 3 minus 3 =                             |                                  | . 0                 |                         |          | X40=                          |                        | 1      | X80=                | 100                    |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |  |   |                                  | -                   |                         |          |                               |                        | OR     |                     |                        |
| * If the difference in column 1 is less than zero, enter                                     |  |  |   |                                  | "O" in o            | olumn 2                 | '        | +135=                         |                        | OR     | +270=               |                        |
| •  |  |  |   |                                  |                     | Oldifili Z              |          | TOTAL                         |                        | OR     |                     | 872                    |
|  | C  | LAIMS AS A<br>(Column 1)                 |   | (Column 3)                       |                     | SMALL E                 | NTITV    | OR                            | OTHER<br>SMALL I       |        |                     |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER             |   | (Colur<br>HIGH<br>NUMI<br>PREVIC | EST<br>BER<br>DUSLY | PRESENT<br>EXTRA        |          | RATE                          | ADDI-<br>TIONAL        |        | RATE                | ADDI-<br>TIONAL        |
|  | Total  | • 32                                     | Minus                                   | PAID                             | 199<br>199          | = 3                     |          | X\$ 9=                        | FEE                    | OR     | X\$18=              | FEE<br>54              |
|  | Independent                                    | . 5                                      | Minus                                   | ***                              | 2                   | = 2                     | lt       | X40=                          |                        | OR     | 8x86=               | 179                    |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |   |                                  |                     |                         | ┇        |                               |                        | OH     |                     | 1/2                    |
|  |  |  |   | ·.                               |                     |                         | L        | +135=                         |                        | OR     | +270=               |                        |
|  |  |  | - TT                                    | :                                |                     |                         | A        | TOTAL<br>DDIT. FEE            |                        | OR     | TOTAL<br>ADDIT. FEE |                        |
|  |  | (Column 1)<br>CLAIMS                     | • | (Colun                           |                     | (Column 3)              | 1 -      |                               |                        |        |                     |                        |
| AMENDMENT 8  |  | REMAINING<br>AFTER<br>AMENDMENT          | ar a gara Marianan y                    | NUME<br>PREVIC<br>PAID           | USLY                | PRESENT<br>EXTRA        |          | RATE                          | ADDI-<br>TIONAL<br>FEE | . #    | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | •  | Minus                                   | **                               |                     | =                       |          | X\$ 9=                        |                        | OR     | X\$18=              |                        |
| AME  | Independent                                    | •  | Minus                                   | ***                              |                     | =                       | ] [      | X40=                          | •                      | OR     | . X80=              |                        |
|  | FIRST PRESE                                    | NTATION OF ML                            | JLTIPLE DEF                             | PENDENT                          | CLAIM               |                         | ┚┝       | +135=                         |                        |        | .070                |                        |
|  |  |  |   |                                  |                     |                         | L        | +135=                         |                        | OR     | +270=<br>TOTAL      |                        |
|  |  |  |   |                                  |                     |                         | A        | DOIT. FEE                     |                        | OR     | ADDIT. FEE          |                        |
|  |  | (Column 1)<br>CLAIMS                     | ·                                       | (Colun                           |                     | (Column 3)              | 1 -      |                               |                        |        |                     |                        |
| AMENDMENT C  |  | REMAINING<br>AFTER<br>AMENDMENT          |   | NUME<br>PREVIO<br>PAID I         | USLY                | PRESENT<br>EXTRA        |          | RATE                          | ADDI-<br>TIONAL<br>FEE |        | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | •  | Minus                                   | **                               |                     | =                       | 1        | X\$ 9=                        |                        | OR     | X\$18=              | ) Say Cor              |
| ME   | Independent                                    | •  | Minus                                   | ***                              |                     | =                       | <b>]</b> | X40=                          |                        |        | X80=                |                        |
| *  | FIRST PRESENTATION OF MULTIPLE DEPENDENT       |  |   |                                  | CLAIM               |                         | J ├      |                               |                        | OR     |                     |                        |
| +135=  * If the entry in column 1 is less than the entry in column 2, write *0" in column 3. |  |  |   |                                  |                     |                         |          |                               |                        | OR     | +270=               |                        |
| ••   | f the "Highest Nui                             | mber Previously Pa<br>mber Previously Pa | id For IN THI                           | S SPACE is                       | less than           | 20, enter "20.          | - A      | TOTAL<br>DDIT. FEE            |                        | OR     | TOTAL<br>ADDIT. FEE |                        |
|  | The "Highest Num                               | ber Previously Pai                       | d For" (Total or                        | Independe                        | nt) is the          | highest number          | er four  | d in the app                  | ropriate box           | in col | umn 1.              |                        |